

ES DEPARTMENT OF COMMERCE **Patent and Trademark Office**

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APPLICATION NUMBER FILING DATE

09/212,714

17/2002

KOCHARLA KOTA

FIRST NAMED APPLICANT

EXAMINER GAUTHIER ART UNIT PAPER NUMBER 2645 6

ATTORNEY DOCKET NO.

INTERVIE	DATE MAILED: EW SUMMARY
All participants (applicant, applicant's representative, PTO personnel):	
(1) GERALD CAUTHIER	(3) GANG LUO
(2) Scott Weaver	(4) Paul Tsou
Date of Interview5/7/2002.	
Type: Telephonic Personal (copy is given to applicant	Applicant's representative).
Exhibit shown or demonstration conducted: Yes No If yes, bri	ief description: Drawing and claims
Agreement	
Claim(s) discussed: Chaim # 1	
Identification of prior art discussed: Sleevi (481	1,882) and Gregoreketal (5,321,740
	latify the steps connection before To overcome the references discussed
(A fuller description, if necessary, and a copy of the amendments, if average attached. Also, where no copy of the amendments which would attached.)	ailable, which the examiner agreed would render the claims allowable ld render the claims allowable is available, a summary thereof must be
1. MI is not necessary for applicant to provide a separate record of the	ne substance of the interview.
Unless the paragraph above has been checked to indicate to the contra IS NOT WAIVED AND MUST INCLUDE THE SUBSTANCE OF THE IN action has are ready been filed, APPLICANT IS GIVEN ONE MONTH F SUBSTANCE OF THE INTERVIEW.	ary. A FORMAL WRITTEN RESPONSE TO THE LAST OFFICE ACTION TERVIEW. (See MPEP Section 713.04). If a response to the last Office FROM THIS INTERVIEW DATE TO FILE A STATEMENT OF THE
 Since the Examiner's interview summary above (including any attrejections and requirements that may be present in the last Office is considered to fulfill the response requirements of the last Office the interview unless box 1 above is also checked. 	tachments) reflects a complete response to each of the objections, e action, and since the claims are now allowable, this completed form a action. Applicant is not relieved from providing a separate record of

Examiner Note: You must sign this form unless it is an attachment to another form.

FORM PTOL-413 (REV.1-96)